

FORM TO BE USED BY A PRISONER IN FILING A CIVIL RIGHTS COMPLAINT

IN THE UNITED STATES DISTRICT COURT  
FOR THE MIDDLE DISTRICT OF PENNSYLVANIA

(1) Trevon Jackson 75229067 :  
(Name of Plaintiff) (Inmate Number) :

P.O. Box 1000, White Deer, PA 17887 :  
(Address) :

(2) \_\_\_\_\_ :  
(Name of Plaintiff) (Inmate Number) :

\_\_\_\_\_  
(Address) :

(Each named party must be numbered,  
and all names must be printed or typed)

vs.

(1) Douglas K. White :

(2) Catherine Gore :

(3) \_\_\_\_\_ :  
(Names of Defendants) :

(Each named party must be numbered,  
and all names must be printed or typed)

1:20-cv-0853  
(Case Number)

CIVIL COMPLAINT

FILED  
SCRANTON

MAY 26 2020

PER [Signature]  
DEPUTY CLERK

TO BE FILED UNDER: \_\_\_\_\_ 42 U.S.C. § 1983 - STATE OFFICIALS

X 28 U.S.C. § 1331 - FEDERAL OFFICIALS

I. PREVIOUS LAWSUITS

A. If you have filed any other lawsuits in federal court while a prisoner, please list the caption and case number including year, as well as the name of the judicial officer to whom it was assigned:

N/A  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**II. EXHAUSTION OF ADMINISTRATIVE REMEDIES**

In order to proceed in federal court, you must fully exhaust any available administrative remedies as to each ground on which you request action.

- A. Is there a prisoner grievance procedure available at your present institution? X Yes \_\_\_ No
- B. Have you fully exhausted your available administrative remedies regarding each of your present claims? \_\_\_ Yes X No
- C. If your answer to "B" is Yes:
1. What steps did you take? Orally spoken to the Warden Mr. D.K. White, Dr. Schmidt  
Several times and I filed an appeal with northeast regional office
  2. What was the result? The northeast regional office fail to  
respond and acknowledge receipt of delivery.
- D. If your answer to "B" is No, explain why not: It's futile regional fail to  
provide me with a written decision that would allow me to move on to  
the next step. The process is slow paced.

**III. DEFENDANTS**

- (1) Name of first defendant: Douglas K. White  
Employed as Warden at Allenwood how Security Complex  
Mailing address: P.O. Box 1500, White-deer, PA 17887-1500
- (2) Name of second defendant: Catherine Gore  
Employed as LPN at Allenwood how Security Complex  
Mailing address: P.O. Box 1500, White-deer PA 17887-1500
- (3) Name of third defendant: \_\_\_\_\_  
Employed as \_\_\_\_\_ at \_\_\_\_\_  
Mailing address: \_\_\_\_\_

(List any additional defendants, their employment, and addresses on extra sheets if necessary)

**IV. STATEMENT OF CLAIM**

(State here as briefly as possible the facts of your case. Describe how each defendant is involved, including dates and places. Do not give any legal arguments or cite any cases or statutes. Attach no more than three extra sheets if necessary.)

1. Since April 1, 2020, ordered by Mr. White to remain in  
exceptionally close proximity to approximate 150 other inmates  
in an open air, dormitory like housing unit for 24 hours a day

7 days week. I'm vulnerable to contract the COVID-19.

2. On 4/8/20 at 7:11am I requested a blood pressure check and was refused also on 4/5/2020 at 7:18am I was refused to healthcare in Gregg Unit
3. Spoken to Mr. D.K. White on the Compad locally in June of 2019 about my health concerns and medical treatment from past history and encounter

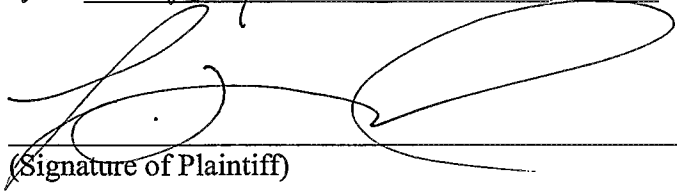
#### V. RELIEF

(State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.)

1. Enforce the Bop to quickly review administrative Remedy process
2. Demand that the prison start COVID-19 testing, provide better medical treatment and services. Also provide Mental health Services.
3. Adopt a process of acceleration evaluation of inmates for Home Confinement that are at-risk to Contract the COVID-19 virus and perishing from it.

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 5 day of May, 2020.

  
(Signature of Plaintiff)

